

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Petition for)
Reconsideration of:)
)
Thomas Glen Ockershausen, M.D.)
)
Physician's and Surgeon's)
Certificate No. A 90122)
)
 Petitioner.)
_____)

Case No. 800-2018-047739

**DENIAL BY OPERATION OF LAW
PETITION FOR RECONSIDERATION**

No action having been taken on the petition for reconsideration, filed by Jacob G. Reinhardt, Esq., on behalf of Thomas Glen Ockershausen, M.D., and the time for action having expired at 5 p.m. on March 22, 2019, the petition is deemed denied by operation of law.

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation Against:)

Thomas Glen Ockershausen, M.D.)

Physician's and Surgeon's)
Certificate No. A 90122)

Respondent)

MBC No. 800-2018-047739

ORDER GRANTING STAY

(Government Code Section 11521)

Robert F. Hahn, Esq., on behalf of respondent, Thomas Glen Ockershausen, M.D., has filed a Request for Stay of execution of the Decision in this matter with an effective date of February 22, 2019, at 5:00 p.m..

Execution is stayed until March 22, 2019.

This stay is granted solely for the purpose of allowing the Respondent to file a Petition for Reconsideration.

DATED: February 14, 2019


Kimberly Kirchmeyer
Executive Director
Medical Board of California

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8 **BEFORE THE**
9 **MEDICAL BOARD OF CALIFORNIA**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:

Case No. 800-2018-047739

13 **THOMAS GLEN OCKERSHAUSEN, M.D.**
14 **500 E. 4th St. # 131**
Austin TX 78701-3720

**DEFAULT DECISION
AND ORDER**

15 **Physician's and Surgeon's Certificate No. A**
16 **90122**

[Gov. Code §11520]

17 Respondent

18 **FINDINGS OF FACT**

19
20 1. On or about November 29, 2018, Complainant Kimberly Kirchmeyer, in her official
21 capacity as the Executive Director of the Medical Board of California (Board), Department of
22 Consumer Affairs, filed Accusation No. 800-2018-047739 against THOMAS GLEN
23 OCKERSHAUSEN, M.D. (Respondent) before the Board.

24 2. On or about February 9, 2005, the Board issued Physician's and Surgeon's Certificate
25 No. A 90122 to Respondent. The Physician's and Surgeon's Certificate expired on February 28,
26 2015, and has not been renewed. (Exhibit Packet, Exhibit 1¹: Certificate of Licensure.)

27
28 ¹ The evidence in support of this Default Decision and Order is submitted herewith as the
"Exhibit Packet."

1 3. On or about August 24, 2018, the Texas Medical Board issued a Mediated Agreed
2 Order (Exhibit Package, Exhibit 2: Texas Order). The Texas Order found that Respondent had
3 engaged in unprofessional conduct and negligently treated two patients and ordered that his
4 license be disciplined. The circumstances are as follows:

5 4. In June 2017, Respondent was assigned to work at an emergency room at a county
6 hospital in Texas. A patient and her newborn infant arrived at the emergency room and instead of
7 adequately evaluating the two patients, Respondent questioned why the patients were in the
8 emergency room and behaved in a disruptive manner. The Texas Medical Board found that
9 Respondent's care of the two patients fell below the standard of practice; and that he failed to use
10 proper diligence in practicing medicine; failed to safeguard against potential complications; and
11 behaved in a disruptive manner in a way that could be reasonably expected to adversely impact
12 the quality of care rendered to a patient.

13 5. As a result of Respondent's unprofessional conduct, the Texas Medical Board ordered
14 that Respondent be prohibited from practicing emergency room medicine or urgent care medicine
15 and from practicing in a solo practice.

16 6. On or about November 29, 2018, an employee of the Board, served by Certified Mail
17 a copy of the Accusation No. 800-2018-047739, Statement to Respondent, Notice of Defense,
18 Request for Discovery, and Government Code sections 11507.5, 11507.6, and 11507.7 to
19 Respondent's address of record with the Board, which was and is 500 E. 4th St. # 131, Austin, TX
20 78701-3720. (Exhibit Packet, Exhibit 3: Accusation, related documents and Declaration of
21 Service.)

22 7. Service of the Accusation was effective as a matter of law under the provisions of
23 Government Code section 11505, subdivision (c).

24 8. On or about December 3, 2018, the U.S. Postal Service delivered the aforementioned
25 documents to an individual at the Respondent's address of record. (Exhibit Packet, Exhibit 4:
26 Certified mail return receipt card.)

27 9. On December 19, 2018, an employee of the Attorney General's Office served by
28 certified mail addressed to Respondent at the afore-mentioned address of record a Courtesy

1 Notice of Default. The Courtesy Notice of Default with a copy of the Accusation and Notice of
2 Defense advised Respondent that he was in default; that he should take immediate action and file
3 a Notice of Defense; and cautioned him that a decision would be rendered by the Board without
4 hearing if he did not take action. (Exhibit Packet, Exhibit 5: Courtesy Notice of Default and
5 Declaration of Service.)

6 **STATUTORY AUTHORITY**

7 10. Business and Professions Code section 118 states, in pertinent part:

8 "(b) The suspension, expiration, or forfeiture by operation of law of a license issued by a
9 board in the department, or its suspension, forfeiture, or cancellation by order of the board or by
10 order of a court of law, or its surrender without the written consent of the board, shall not, during
11 any period in which it may be renewed, restored, reissued, or reinstated, deprive the board of its
12 authority to institute or continue a disciplinary proceeding against the licensee upon any ground
13 provided by law or to enter an order suspending or revoking the license or otherwise taking
14 disciplinary action against the license on any such ground."

15 11. Government Code section 11506 states, in pertinent part:

16 "(c) The respondent shall be entitled to a hearing on the merits if the respondent files a
17 notice of defense, and the notice shall be deemed a specific denial of all parts of the accusation
18 not expressly admitted. Failure to file a notice of defense shall constitute a waiver of respondent's
19 right to a hearing, but the agency in its discretion may nevertheless grant a hearing."

20 Respondent failed to file a Notice of Defense within 15 days after service upon him of the
21 Accusation, and therefore waived his right to a hearing on the merits of Accusation No. 800-
22 2018-047739.

23 12. California Government Code section 11520 states, in pertinent part:

24 "(a) If the respondent either fails to file a notice of defense or to appear at the hearing, the
25 agency may take action based upon the respondent's express admissions or upon other evidence
26 and affidavits may be used as evidence without any notice to respondent."

27 ///

28 ///

13. Section 2305 of the Code states:

“The revocation, suspension, or other discipline, restriction or limitation imposed by another state upon a license or certificate to practice medicine issued by that state, or the revocation, suspension, or restriction of the authority to practice medicine by any agency of the federal government, that would have been grounds for discipline in California of a licensee under this chapter [Chapter 5, the Medical Practice Act] shall constitute grounds for disciplinary action for unprofessional conduct against the licensee in this state.”

14. Section 141 of the Code states:

"(a) For any licensee holding a license issued by a board under the jurisdiction of the department, a disciplinary action taken by another state, by any agency of the federal government, or by another country for any act substantially related to the practice regulated by the California license, may be a ground for disciplinary action by the respective state licensing board. A certified copy of the record of the disciplinary action taken against the licensee by another state, an agency of the federal government, or another country shall be conclusive evidence of the events related therein.

"(b) Nothing in this section shall preclude a board from applying a specific statutory provision in the licensing act administered by that board that provides for discipline based upon a disciplinary action taken against the licensee by another state, an agency of the federal government, or another country."

15. Pursuant to its authority under Government Code section 11520, the Board finds Respondent is in default. The Board will take action without further hearing and, based on Respondent's express admissions by way of default and the evidence before it, contained in Exhibits 1,2,3, 4 and 5 of the Exhibit Packet, finds that the allegations in Accusation No. 800-2018-047739 are true.

DETERMINATION OF ISSUES

1. Based on the foregoing Findings of Fact, Respondent's conduct, and the actions of the Texas Medical Board, constitute cause for discipline within the meaning of Business and Professions Code sections 2305 and 141 (a).

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Pursuant to Government Code section 11520, subdivision (c), Respondent may serve a written motion requesting that the Decision be vacated and stating the grounds relied on within seven (7) days after service of the Decision on Respondent. The agency in its discretion may vacate the Decision and grant a hearing on a showing of good cause, as defined in the statute.

It is so ORDERED January 23, 2019

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Attorneys for Complainant
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8 BEFORE THE
9 MEDICAL BOARD OF CALIFORNIA
10 DEPARTMENT OF CONSUMER AFFAIRS
11 STATE OF CALIFORNIA

12 In the Matter of the Accusation Against:

Case No. 800-2018-047739

13 **Thomas Glen Ockershausen, M.D.**
14 **500 E. 4th St. # 131**
15 **Austin TX 78701-3720**

A C C U S A T I O N

16 **Physician's and Surgeon's Certificate**
17 **No. A 90122,**

18 Respondent.

19
20
21 Complainant alleges:

22 **PARTIES**

23 1. Kimberly Kirchmeyer (Complainant) brings this Accusation solely in her official
24 capacity as the Executive Director of the Medical Board of California, Department of Consumer
25 Affairs (Board).

26 2. On or about February 9, 2005, the Medical Board issued Physician's and Surgeon's
27 Certificate Number A 90122 to Thomas Glen Ockershausen, M.D. (Respondent). The Physician's
28 and Surgeon's Certificate expired on February 28, 2015, and has not been renewed.

JURISDICTION

3. This Accusation is brought before the Board, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.

4. Section 2227 of the Code provides, in part, that a licensee who is found guilty under the Medical Practice Act may have his or her license revoked, suspended for a period not to exceed one year, placed on probation and required to pay the costs of probation monitoring, be publicly reprimanded, or such other action taken in relation to discipline as the Board deems proper.

5. Section 2234 of the Code provides that the Board shall take action against a licensee who is charged with unprofessional conduct.

6. Section 2305 of the Code states:

“The revocation, suspension, or other discipline, restriction or limitation imposed by another state upon a license or certificate to practice medicine issued by that state, or the revocation, suspension, or restriction of the authority to practice medicine by any agency of the federal government, that would have been grounds for discipline in California of a licensee under this chapter [Chapter 5, the Medical Practice Act] shall constitute grounds for disciplinary action for unprofessional conduct against the licensee in this state.”

7. Section 141 of the Code states:

“(a) For any licensee holding a license issued by a board under the jurisdiction of the department, a disciplinary action taken by another state, by any agency of the federal government, or by another country for any act substantially related to the practice regulated by the California license, may be a ground for disciplinary action by the respective state licensing board. A certified copy of the record of the disciplinary action taken against the licensee by another state, an agency of the federal government, or another country shall be conclusive evidence of the events related therein.

“(b) Nothing in this section shall preclude a board from applying a specific statutory provision in the licensing act administered by that board that provides for discipline based upon a

1 disciplinary action taken against the licensee by another state, an agency of the federal
2 government, or another country.”

3 CAUSE FOR DISCIPLINE

4 **(Discipline, Restriction, or Limitation Imposed by Another State)**

5 8. On or about August 24, 2018, the Texas Medical Board issued a Mediated Agreed
6 Order (Texas Order). The Texas Order found that Respondent had engaged in unprofessional
7 conduct and negligently treated two patients and ordered that his license be disciplined. The
8 circumstances are as follows:

9 9. In June 2017, Respondent was assigned to work at an emergency room at a county
10 hospital in Texas. A patient and her newborn infant arrived at the emergency room and instead of
11 adequately evaluating the two patients, Respondent questioned why the patients were in the
12 emergency room and behaved in a disruptive manner. The Texas Medical Board found that
13 Respondent’s care of the two patients fell below the standard of practice; and that he failed to use
14 proper diligence in practicing medicine; failed to safeguard against potential complications; and
15 behaved in a disruptive manner in a way that could be reasonably expected to adversely impact
16 the quality of care rendered to a patient.

17 10. As a result of Respondent’s unprofessional conduct, the Texas Medical Board ordered
18 that Respondent be prohibited from practicing emergency room medicine or urgent care medicine
19 and from practicing in a solo practice.

20 11. Respondent’s conduct as set forth above in paragraphs 8 through 10, and the actions
21 of the Texas Medical Board, as set forth in the Texas Order, constitute unprofessional conduct
22 within the meaning of section 2305 and conduct subject to discipline within the meaning of
23 section 141(a). The Texas Order is attached as Exhibit A.

24 PRAYER

25
26 WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged,
27 and that following the hearing, the Medical Board of California issue a decision:
28

- 1 1. Revoking or suspending Physician's and Surgeon's Certificate Number A 90122,
2 issued to Respondent;
- 3 2. Revoking, suspending or denying approval of Respondent's authority to supervise
4 physician assistants and advanced practice nurses;
- 5 3. Ordering Respondent, if placed on probation, to pay the Board the costs of probation
6 monitoring; and
- 7 4. Taking such other and further action as deemed necessary and proper.

8
9 DATED: November 29, 2018


KIMBERLY KIRCHMEYER
Executive Director
Medical Board of California
Department of Consumer Affairs
State of California
Complainant

EXHIBIT A

TEXAS MEDICAL BOARD LICENSE NO. L-4614

IN THE MATTER OF

BEFORE THE

THE LICENSE OF

THOMAS GLEN OCKERSHAUSEN, M.D.

TEXAS MEDICAL BOARD

MEDIATED AGREED ORDER

On the 24 day of August, 2018, came on to be heard before the Texas Medical Board (Board), duly in session, the matter of the license of Thomas Glen Ockershausen, M.D. (Respondent).

On or around November 6, 2017, Board Staff notified Respondent that he was invited to an Informal Settlement Conference (ISC) to address certain alleged violations of the Texas Medical Practice Act, TEX. OCC. CODE ANN. §§151.001 *et seq.* (Vernon Supp. 2017) (Act) and related Board rules. On January 12, 2018, Respondent did not appear at the ISC in response to the letter of invitation from Board Staff. The Board's representatives were Jeffrey Luna, M.D., a member of the Board, and Larry Buehler, a member of a District Review Committee (Panel). Michelle A. McFaddin represented Board Staff.

Board Staff was not able to negotiate a resolution to this matter with Respondent and on March 30, 2018, Board Staff filed a Complaint with the State Office of Administrative Hearings (SOAH) alleging violations of the Act and Board rules. Rather than file an Answer or General Denial, Respondent and Board Staff filed a joint motion for mediation and abatement of discovery on or around May 24, 2018. The SOAH ALJ granted the joint motion for mediation and abated discovery in Order No. 3 issued on May 30, 2018.

Mediation in this matter was held on June 29, 2018. Respondent appeared with counsel, Brian Tew. Board Staff was represented by Michelle A. McFaddin. The Board was represented by Dr. Jeffrey Luna. The parties were able to reach an agreement, as is memorialized in this mediated agreed order.

BOARD CHARGES

Board Staff alleges that Respondent engaged in unprofessional conduct and failed to satisfy the applicable standard of care in his treatment of one patient and her newborn infant by failing to adequately evaluate these two patients upon their arrival at Martin County Hospital's

emergency room, instead relying on nursing staff to assess the patients and initiate their transfer to Midland Memorial Hospital.

BOARD HISTORY

Respondent has not been previously the subject of disciplinary action by the Board during the past sixteen years of practice.

Upon the recommendation of the Board's representatives and with the consent of Respondent, the Board makes the following Findings and Conclusions of Law and enters this Agreed Order.

FINDINGS

The Board finds the following:

1. General Findings:

- a. Respondent received all notice required by law. All jurisdictional requirements have been satisfied. Respondent waives any defect in notice and any further right to notice or hearing under the Medical Practice Act and the rules of the Board.
- b. Respondent currently holds Texas Medical License No. L-4614. Respondent was originally issued this license to practice medicine in Texas on August 16, 2002. Respondent was also licensed to practice medicine in California and Florida but has allowed these licenses to expire.
- c. Respondent is primarily engaged in the practice of rural/emergency medicine. Respondent is Board certified by the American Board of Internal Medicine, a member of the American Board of Medical Specialties.
- d. Respondent is 46 years of age.

2. Specific Panel Findings:

- a. Respondent began working for Concord Medical Group (Concord) around 2010 to provide emergency room (ER) coverage in small rural hospitals.
- b. In the sixteen years since licensing, Respondent has successfully delivered babies but informed Concord that he did not want to be assigned to a hospital emergency room with a neonatal care unit.

- c. In June, 2017, Concord assigned Respondent to work at an ER in La Mesa, Texas, and in Martin County, Texas.
- d. Martin County Hospital does not have a neonatal care unit. Prior to Respondent's first shift at Martin County Hospital, the hospital had a newborn die and required its staff to attend special training and to develop a protocol for the care of mother and child after a precipitous delivery.
- e. Respondent was not informed of the Martin County Hospital's new protocol until EMS notified the ER that they would be bringing a mother and newborn infant into Martin County Hospital's ER. Respondent understood that EMS was not to bring neonatal patients to the ER, but instead were to deliver them to the Big Spring or Midland hospitals, each of which facilities provided special neonatal care facilities.
- f. EMS notified the Martin County Hospital that the baby and placenta had been delivered off-site and the mother was stable and transported the patients to the Martin County Hospital's ER, which was in closest proximity to the delivery site.
- g. When mother and infant arrived at the Martin County Hospital ER, Respondent asked EMS why they were bringing the patients to Martin County, Texas. EMS informed Respondent that due to inclement weather, they had transported the patients to the closest ER facility. Respondent was upset that they brought the patients to the Martin County Hospital ER rather than Midland Memorial Hospital.
- h. Respondent and ER staff evaluated both patients and determined that they were stable. Respondent realized that the staff was complying with the Hospital recently-developed protocol and it appeared that the situation was under control.
- i. Respondent deferred to the nursing staff and its recently-developed protocol on precipitous deliveries but he did assist in the transfer of the patients by explaining the risks and benefits associated with their transfer and by signing the electronic transfer form.
- j. Within 1 ½ hours, the mother and infant were transported to Midland Memorial Hospital, where they arrived in stable condition.

3. Mitigating Factors:

In determining the appropriate sanctions in this matter in accordance with Board Rule 190.15, the Panel considered the mitigating factors:

- a. Respondent has no previous disciplinary history with the Board.
- b. Respondent has accepted responsibility for his unprofessional conduct in the emergency room and apologized to the mother for allowing his frustration to affect his behavior prior to her transfer to Midland Memorial Hospital.
- c. Respondent has cooperated in the investigation of the allegations related to this Agreed Order. Respondent neither admits nor denies the information given above. To avoid further investigation, hearings, and the expense and inconvenience of litigation, Respondent agrees to the entry of this Agreed Order and to comply with its terms and conditions.

CONCLUSIONS OF LAW

Based on the above Findings, the Board concludes that:

1. The Board has jurisdiction over the subject matter and Respondent pursuant to the Act.
2. Section 164.051(a)(1) of the Act authorizes the Board to take disciplinary action against Respondent based on Respondent's commission of an act prohibited under Section 164.052 of the Act.
3. Section 164.051(a)(6) of the Act authorizes the Board to take disciplinary action against Respondent based on Respondent's failure to practice medicine in an acceptable professional manner consistent with public health and welfare, as further defined by Board Rule(s): 190.8(1)(A), failing to treat a patient according to the generally accepted standard of care; 190.8(1)(C), failing to use proper diligence in one's professional practice; and 190.8(1)(D), failing to safeguard against potential complications.
4. Section 164.052(a)(5) of the Act authorizes the Board to take disciplinary action against Respondent based upon Respondent's unprofessional or dishonorable conduct that is likely to deceive or defraud the public or injure the public, as further defined by Board Rule 190.8(2)(P), behaving in a disruptive manner towards licensees, hospital personnel,

other medical personnel, patients, family members, or others that interferes or could reasonably be expected to adversely impact the quality of care rendered to a patient.

5. Section 164.001 of the Act authorizes the Board to impose a range of disciplinary actions against a person for violation of the Act or a Board rule.
6. Section 164.002(a) of the Act authorizes the Board to resolve and make a disposition of this matter through an Agreed Order.
7. Section 164.002(d) of the Act provides that this Agreed Order is a settlement agreement under the Texas Rules of Evidence for purposes of civil litigation.

ORDER

Based on the above Findings and Conclusions of Law, the Board ORDERS that Respondent shall be subject to the following terms and conditions:

1. Respondent shall not engage in the practice of emergency room or urgent care medicine. If Respondent wishes to petition the Board to have this license restriction lifted, Respondent shall successfully complete the following:
 - a. **Independent Medical Evaluation:** Respondent shall submit to and obtain an independent medical evaluation from a Board-approved evaluating psychiatrist.
 - (1) The independent medical evaluation shall be conducted as directed by the Board, including, at a minimum:
 - (a) Social history and background information;
 - (b) History of present illness;
 - (c) Mental status exam;
 - (d) Review of records and other pertinent information;
 - (e) Current DSM multi-axial diagnosis, and
 - (f) Recommendations regarding continued care and treatment.
 - (2) Respondent shall furnish a copy of this Order to the evaluating psychiatrist, who shall make a full report to the Compliance Division of the Board regarding the evaluating psychiatrist's evaluation of Respondent and recommendations.
 - (3) Respondent shall pay all fees charged by the evaluating psychiatrist.

- (4) Respondent shall follow all recommendations made by the evaluating psychiatrist regarding continued care and treatment.
- (5) If the evaluating psychiatrist recommends continued care and treatment, Respondent shall submit letters from at least three physicians who are board certified in psychiatry and who have agreed to serve as Respondent's approved treating psychiatrist for Board approval. At a minimum, the treating psychiatrist must:
 - (a) have been provided a copy of this Order;
 - (b) agree to provide psychiatric treatment to Respondent; and
 - (c) agree to provide periodic reports regarding Respondent's compliance with treatment and rehabilitation to (i) the Compliance Division of the Board or (ii) an independent monitoring psychiatrist.
 - (d) A proposed treating psychiatrist may not be approved unless the proposed treating psychiatrist agrees to provide periodic reports either to the Compliance Division of the Board or to an independent monitoring psychiatrist.
 - (e) The Executive Director may reject all of the proposed treating psychiatrists and require the submission of additional letters or approve one or more to be the approved treating psychiatrist.
 - (f) Respondent shall begin the recommended care and treatment within 30 days after notification of approval of the treating psychiatrist.
 - (g) Respondent shall pay all fees charged by the treating psychiatrist.
 - (h) Respondent shall follow all recommendations made by the treating psychiatrist regarding continued care and treatment.
 - (i) Board staff may furnish to the treating psychiatrist any Board information that it determines, in its discretion, may be helpful or required for the treatment of Respondent.
 - (j) The treating psychiatrist may require Respondent to participate in alcohol and/or drug screens and shall immediately report any positive results either directly to the Compliance Division of the Board or to an independent monitoring psychiatrist.

- (k) The treating psychiatrist shall report, either directly to the Compliance Division of the Board or to an independent monitoring psychiatrist, any unilateral withdrawal from treatment by Respondent.
 - (l) Respondent shall execute any and all releases for medical records and authorizations necessary to effectuate the provisions of this Order.
 - (m) Respondent's failure to cooperate with the treating psychiatrist or failure to follow the treating psychiatrist's recommendations shall constitute a violation of this Order.
 - b. Respondent shall obtain a certification on neonatal advanced life support, pediatric advanced life support and in ALSO, advanced life support in obstetrics. Upon completing these certification requirements, Respondent shall submit proof to the Compliance Division of the Board by providing a true and accurate copy of a certificate of completion and other supporting documentation needed to confirm these certifications.
 - c. Respondent shall enroll in and successfully complete at least 24 hours of continuing medical education (CME) approved for Category I credits by the American Medical Association or the American Osteopathic Association, on the topic of pediatric and obstetric emergencies, each approved in writing in advance by the Executive Director or a designee. To obtain approval for the course, Respondent shall submit in writing to the Compliance Department information on the course, to include at least a reasonably detailed description of the course content and faculty, as well as the course location and dates of instruction. Respondent shall submit documentation of attendance and successful completion of this requirement to the Compliance Department on or before the expiration of the time limit set forth for completion of the course. The CME requirements set forth in this paragraph shall be in addition to all other CME required for licensure maintenance.
2. Respondent shall limit Respondent's medical practice, including any office and inpatient practice, to a group or an institutional setting approved in advance in the discretion of the Executive Director of the Board. Respondent shall provide a copy of this Order to the group or institutional setting administrator. If there are any personnel or scheduling

changes related to the approved setting, the Respondent shall notify the Board in writing of those changes within 14 days. If the Respondent wants to petition the Board to lift this work place restriction, Respondent must successfully complete the independent medical evaluation (IME) described in Ordering Subparagraph 1(a), above.

3. At all times while Respondent is under the terms of this Order, Respondent shall give a copy of this Order to all hospitals, nursing homes, treatment facilities, and other health care entities in Texas where Respondent has privileges, has pending an application for privileges, applies for privileges, or otherwise practices. Within 30 days of being first contacted by the Compliance Division of the Board following entry of this Order, Respondent shall provide to the Compliance Division of the Board documentation, including proof of delivery showing that the Order was delivered to all such facilities.
4. Pursuant to Board Rule 189.15, the time period of this Order shall be extended for any period of time that: (a) Respondent subsequently practices exclusively outside the State of Texas; (b) this Order is stayed or enjoined by Court Order; or (c) for any period of time longer than 60 consecutive days that Respondent does not actively practice medicine and such cessation in practice is NOT due to a suspension of Respondent's license. Respondent shall immediately notify the Board in writing in the event that Respondent leaves Texas to practice elsewhere or ceases active practice for more than 60 consecutive days. Upon Respondent's return to active practice in Texas, Respondent shall notify the Board in writing. Upon return to Texas or active practice, Respondent shall be required to comply with the terms of this Order for the period of time remaining on the Order. Respondent shall pay all fees for reinstatement or renewal of a license covering the period of extension or tolling. Tolling shall be in accordance with Board Rule 189.15.
5. Respondent shall comply with all the provisions of the Act and other statutes regulating the Respondent's practice.
6. Respondent shall fully cooperate with the Board and the Board staff, including Board attorneys, investigators, compliance officers, consultants, and other employees or agents of the Board in any way involved in investigation, review, or monitoring associated with Respondent's compliance with this Order. Failure to fully cooperate shall constitute a violation of this order and a basis for disciplinary action against Respondent pursuant to the Act.

7. Respondent shall inform the Board in writing of any change of Respondent's office or mailing address within 10 days of the address change. This information shall be submitted to the Registration Department and the Compliance Department of the Board. Failure to provide such information in a timely manner shall constitute a basis for disciplinary action by the Board against Respondent pursuant to the Act. Respondent agrees that 10 days notice of a Probationer Show Compliance Proceeding to address any allegation of non-compliance of this Agreed Order is adequate and reasonable notice prior to the initiation of formal disciplinary action. Respondent waives the 45-day notice requirement provided by §164.003(b)(2) of the Medical Practice Act and agrees to 10 days notice, as provided in 22 Texas Administrative Code §187.44(4).
8. Any violation of the terms, conditions, or requirements of this Order by Respondent shall constitute unprofessional conduct likely to deceive or defraud the public, or to injure the public, and shall constitute a basis for disciplinary action by the Board against Respondent pursuant to the Act.
9. The above referenced conditions shall continue in full force and effect without opportunity for amendment, except for clear error in drafting, for one year following the date of the entry of this Order. If, after the passage of the one year period, Respondent wishes to seek amendment or termination of these conditions, Respondent may petition the Board in writing. The Board may inquire into the request and may, in its sole discretion, grant or deny the petition without further appeal or review. Petitions for modifying or terminating may be filed only once a year thereafter.

RESPONDENT WAIVES ANY FURTHER HEARINGS OR APPEALS TO THE BOARD OR TO ANY COURT IN REGARD TO ALL TERMS AND CONDITIONS OF THIS AGREED ORDER. RESPONDENT AGREES THAT THIS IS A FINAL ORDER.

THIS ORDER IS A PUBLIC RECORD.

(SIGNATURE PAGES FOLLOW)

I, THOMAS GLEN OCKERSHAUSEN, M.D., HAVE READ AND UNDERSTAND THE FOREGOING AGREED ORDER. I UNDERSTAND THAT BY SIGNING, I WAIVE CERTAIN RIGHTS. I SIGN IT VOLUNTARILY. I UNDERSTAND THIS AGREED ORDER CONTAINS THE ENTIRE AGREEMENT AND THERE IS NO OTHER AGREEMENT OF ANY KIND, VERBAL, WRITTEN OR OTHERWISE.

DATED: June, 29, 2018.



THOMAS GLEN OCKERSHAUSEN, M.D.
Respondent

STATE OF TEXAS

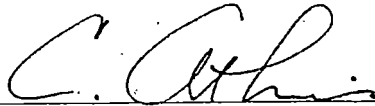
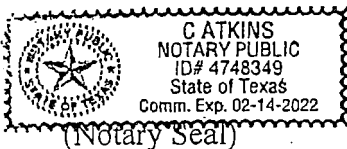
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COUNTY OF TRAVIS

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SWORN TO AND ACKNOWLEDGED BEFORE ME, the undersigned Notary Public, on this 29th day of June, 2018.



Signature of Notary Public

SIGNED AND ENTERED by the presiding officer of the Texas Medical Board on this

24 day of August, 2018.



Sherif Z. Zaafarani, M.D., President
Texas Medical Board

STATE OF TEXAS
COUNTY OF TRAVIS

I, Christine Hickey certify that I am an official
assistant custodian of records for the Texas Medical Board
and that this is a true and correct Copy of the original, as it
appears on the file in this office.

Witness my official hand and seal of the BOARD.

This 14th Day of September, 2018

Christine Hickey

Assistant Custodian of Records